

CLAIMS ONLY

Application Number

09/879,804

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED 5/6/05		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
2						
3						
4		1				
5	1					
6						
7						
8	1					
9						
10						
11		1				
12		1				
13		1				
14		1				
15	1					
16						
17						
18		1				
19		1				
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27						
28						
29						
30	1					
31	1					
32		1				
33						
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39						
40						
41						
42						
43						
44						
45						
46						
47	1					
48						
49		1				
50		1				
Total Indep						
Total Depend						
Total Claims						

	*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend
51						
52						
53						
54						
55						
56						
57						
58						
59	1					
60		1				
61		1				
62		1				
63		1				
64		1				
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67	1					
68	1					
69	1					
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94						
95						
96						
97						
98						
99						
100						
Total Indep	13					
Total Depend	20					
Total Claims	33					